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25225 7590 04/22/2004

MORRISON & FOERSTER LLP
3811 VALLEY CENTRE DRIVE
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SAN DIEGO, CA 92130-2332

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Marian Christopher

(Depositor's name)

(Signature)

May 6, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/052,832	01/15/2002	Gregory R. Mundy	432722002612	3485

TITLE OF INVENTION: INHIBITORS OF PROTEASOMAL ACTIVITY FOR STIMULATING HAIR GROWTH

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GITOMER, RALPH J	1651	435-130000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Morrison & Foerster LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

OsteoScreen, Inc.

San Antonio, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 10

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1952 (enclose an extra copy of this form).

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Authorized Signature
(Date) 5-6-04
Laurie L. Hill, Ph.D. (Reg. No. 51,804)

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05/12/2004 FMETEK12 00000097 031952 10052832

01 FC:2501	665.00 DA
02 FC:1504	300.00 DA
03 FC:8001	30.00 DA

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